

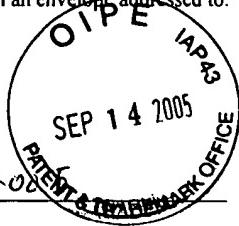
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P.O. Box 1450
Alexandria, VA 22313-1450

On August 30, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: mtd
Mark T. Davis



PATENT
Attorney Docket No.: 022193-090610US
Client Reference No.: US 10/017182

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Timothy TUTTLE et al.

Application No.: 10/017,182

Filed: December 14, 2001

For: TECHNIQUES FOR UPDATING
LIVE OBJECTS AT CLIENTS USING A
DYNAMIC ROUTING NETWORK (AS
AMENDED)

Examiner: Barot, Bharat

Art Unit: 2155

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner. Copies of the references [in compliance with the requirements of 1287 OG 163] are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

09/15/2005 SDENBOB1 00000024 201430 10017182

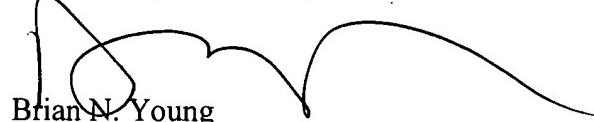
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As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,


Brian N. Young
Reg. No. 48,602

TOWNSEND and TOWNSEND and CREW LLP
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Tel: 415-576-0200
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BNY:mtd

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<p>Substitute for form 1449A&B/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(use as many sheets as necessary)</p>				<p style="text-align: center;">Complete if Known</p> <table border="1"> <tr> <td>Application Number</td> <td>10/017,182</td> </tr> <tr> <td>Filing Date</td> <td>December 14, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Tuttle, Timothy</td> </tr> <tr> <td>Art Unit</td> <td>2155</td> </tr> <tr> <td>Examiner Name</td> <td>Barot, Bharat</td> </tr> <tr> <td>Attorney Docket Number</td> <td>022193-090610US</td> </tr> </table>		Application Number	10/017,182	Filing Date	December 14, 2001	First Named Inventor	Tuttle, Timothy	Art Unit	2155	Examiner Name	Barot, Bharat	Attorney Docket Number	022193-090610US
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Examiner Name	Barot, Bharat																
Attorney Docket Number	022193-090610US																
Sheet	1	of	1														

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
AA	US-5,706,516		01-1998	Chang et al.	
AB	US 6,233,600 B1		05-2001	Salas et al.	
AC	US-6,324,587		11-2001	Trenbeath et al.	
AD	US 6,363,421 B2		03-2002	Barker et al.	
AE	US 6,418,448 B1		07-2002	Sarkar	
AF	US 6,446,257 B1		09-2002	Pradhan et al.	
AG	US-6,609,138		08-2003	Merriam	
AH	US-6,836,86 B2		12-2004	Tuerke et al.	
AI	US 10/105,018			Tuttle et al.	
AJ	US 10/213,269			Cano et al.	

Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

\$2155 IN



Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEES TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180)

Complete if Known	
Application Number	10/017,182
Filing Date	December 14, 2001
First Named Inventor	Tuttle, Timothy
Examiner Name	Barot, Bharat
Art Unit	2155
Attorney Docket No.	022193-090610US

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify): _____
- Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments
- under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity
Fee (\$) Fee (\$)
50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-20 or HP =	x	=				

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-3 or HP =	x	=				

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

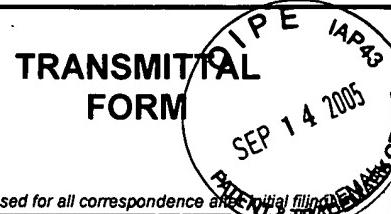
Other: Submission of Information Disclosure Stmt

Fees Paid (\$)
180

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 48,602	Telephone 415-576-0200
Name (Print/Type)	Brian N. Young		Date August (30), 2005

TRANSMITTAL FORM		Application Number	10/017,182
		Filing Date	December 14, 2001
		First Named Inventor	Tuttle, Timothy
		Art Unit	2155
(to be used for all correspondence after initial filing)		Examiner Name	Barot, Bharat
Total Number of Pages in This Submission	5	Attorney Docket Number	022193-090610US



ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Return Postcard	
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund		
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape/Table on CD		
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Brian N. Young		
Date	August (30), 2005	Reg. No.	48,602

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Mark T. Davis	Date	August (30), 2005